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Bib Data Sheet

CONFIRMATION NO. 4251

SERIAL NUMBER 10/720,617	FILING OR 371(c) DATE 11/24/2003 RULE	CLASS 502	GROUP ART UNIT 1755	ATTORNEY DOCKET NO. 2003B125
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APPLICANTS

David M. Lowe, Sunnyvale, CA;
 Michel Molinier, Houston, TX;
 John D.Y. Ou, Houston, TX;
 Michael A. Risch, Seabrook, TX;
 Anthony F. Volpe JR., Santa Clara, CA;
 Jeffrey C. Yoder, San Jose, CA;

*PMA***** CONTINUING DATA ********PMA None***** FOREIGN APPLICATIONS ********PMA***IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 03/10/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 0	TOTAL CLAIMS 20 30	INDEPENDENT CLAIMS 1 *
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>PMA Allowance</i>				

ADDRESS

23455

TITLE

Catalyst and process for selective hydrogenation

FILING FEE RECEIVED 1416	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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